U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/810,764 Application Number **FEE TRANSMITTAL** Filing Date 03/26/2004 For FY 2008 First Named Inventor David J. Love Examiner Name Jaison Joseph Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2611 TOTAL AMOUNT OF PAYMENT 1,120,00 Attorney Docket No. TI-35144 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): ✓ Deposit Account Deposit Account Number: 20-0668 Deposit Account Name: Texas Instruments Inc. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity Small Entity Small Entity Application Type** Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 310 510 210 105 155 255 Design 210 105 100 50 130 65 Plant 210 105 310 155 160 80 Reissue 310 510 620 155 255 310 210 Provisional 105 0 0 0 2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee Description Fee (\$) 50 25 Each claim over 20 (including Reissues) 210 105 Each independent claim over 3 (including Reissues) 370 185 Multiple dependent claims **Total Claims** Fee Paid (\$) **Multiple Dependent Claims** Extra Claims Fee (\$) 22 - 20 or HP = ____2 x __ 50 Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. 310.00 Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) 4 - 3 or HP = ____1__x 210 HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Extra Sheets Fee Paid (\$) **Total Sheets** ____ (round **up** to a whole number) x - 100 = 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): RCE 810.00

SUBMITTED BY			
Signature	Stevent: Heate	Registration No. (Attorney/Agent) 58,076	Telephone 972-480-8800
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This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.